Small Purchase RFP for Professional Services for Community Development Block Grant – Disaster Recovery (CDBG-DR)
SP# 201908_074_RFP for Myers Briggs Type Indicator, Testing and Review

1. General Information

1.1. Title of Request: Myers Briggs Type Indicator, Testing and Review

1.2. Purpose: The Governor’s Office of Storm Recovery (GOSR), a division of the Housing Trust Fund Corporation (HTFC), seeks to procure Myers Briggs Type Indicator (“MBTI”), Testing and Review in connection with its administration of the U.S. Department of Housing and Urban Development (HUD) Community Development Block Grant- Disaster Recovery (CDBG-DR) funds appropriated by the Disaster Relief Appropriations Act, 2013 (Pub. L. 113-2).

This RFP request is issued in accordance with the Procurement and Contract Guidelines of GOSR and in compliance with Section 2879a of the New York Public Authorities Law.

1.3. The total compensation for this scope of work shall not exceed $150,000.

1.4. Business Participation Opportunities for MWBE’s

Pursuant to New York State Executive Law Article 15-A (“Article 15-A”), GOSR recognizes its obligation to promote opportunities for maximum feasible participation of certified Minority- and Women-Owned Business Enterprises (“MWBEs”), and the employment of minority group members and women in the performance of all New York State funded GOSR contracts.

For purposes of this solicitation, HTFC hereby establishes an overall goal of 30% for MWBE participation for the above described services performed under the contract(s) awarded pursuant to this RFP: 15% for Minority-Owned Business Enterprises and 15% for Women-Owned Business Enterprises.
Respondents that are not MWBEs are strongly encouraged to consider partnering, or making other joint venture or subcontracting arrangements, with certified MWBE firms to achieve the prescribed goals and to give MWBE firms the opportunity to participate in the above-described services performed under the contract(s) awarded to the successful bidder(s).

The directory of MWBE’s can be viewed at https://ny.newnycontracts.com For guidance on how GOSR will determine a Contractor’s “good faith efforts,” refer to 5 NYCRR §142.8.

1.5. Basis/Number of Awards

GOSR will evaluate each proposal based on the “Best Value” concept. This means that the proposal that “optimizes quality, cost and efficiency among responsive and responsible offerors” shall be selected for award. (State Finance Law, Article 11, § 163). GOSR at its sole discretion will determine which proposal best satisfies its requirements. At the sole discretion of GOSR and based upon the breadth and experience of Respondents to this RFP, GOSR may award contracts to more than one Respondent. GOSR currently anticipates awarding one (1) contract pursuant to this RFP. GOSR intends on allocating work via use of a task order. Nothing in this section shall be construed to limit in any way GOSR’s right, in its sole discretion, to cancel this RFP.

1.6. RFP and Proposal as Part of Contract

This RFP and the selected Respondent’s Proposal will become part of any contract between GOSR and the Respondent. In the event that the terms of the RFP or Proposal conflict with the contract, the contract terms shall control.

1.7. Designated Contact Officer

Chaddy Gamero
Senior Procurement Analyst
GOSR.SmallProcurement@stormrecovery.ny.gov

Proposals, questions and correspondence must be submitted by email in pdf format to:

GOSR.SmallProcurement@stormrecovery.ny.gov

Pursuant to State Finance Law §§ 139-j and 139-k, this solicitation includes and imposes certain restrictions on communications between GOSR and Respondents during the solicitation process. A bidder is restricted from making contacts, from the earliest notice of intent to solicit offers through final award and approval of the contract (the restricted period), with GOSR staff other than the Designated Contact Officer unless it is a contact that is included among certain statutory exceptions set forth in State Finance Law § 139-j(3)(a).

GOSR employees are required to obtain certain information when contacted during the restricted period and make a determination of responsibility of the Bidder pursuant to these two statutes. Certain findings of non-responsibility can result in the rejection for contract award and, in the event of two (2) findings within a four-year period; the Bidder is debarred from obtaining governmental procurement contracts. Information on these requirements can be found at:

http://www.ogs.state.ny.us/aboutogs/regulations/defaultAdvisoryCouncil.html

For all lobbying law contacts and inquiries, please contact:
Natalie Dennery
Lobbying Contact Officer
Governor’s Office of Storm Recovery
Email: GOSR.SmallProcurement@stormrecovery.ny.gov
Email must indicate subject: RE: Lobbying Inquiry

3. Proposal Timeline

Please note that the RFP timeline includes target dates and may change.

<table>
<thead>
<tr>
<th>Target Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 15, 2019</td>
<td>Solicitation Released</td>
</tr>
<tr>
<td>August 22, 2019</td>
<td>Last Day to Submit Questions – 3:00 p.m. (Eastern)</td>
</tr>
<tr>
<td>August 26, 2019</td>
<td>Issuance of Answers to Questions</td>
</tr>
<tr>
<td>September 6, 2019</td>
<td>Submission Deadline - 3:00 p.m. (Eastern)</td>
</tr>
<tr>
<td>September 2019</td>
<td>Target Date for Selection</td>
</tr>
</tbody>
</table>
4. Scope of Services

The Myers–Briggs Type Indicator (MBTI) Assessment is a method for helping people enhance personal growth, clarify career direction, develop leadership skills, and motivate effective teamwork. HTFC/GOSR seeks to procure MBTI Testing and Review services for a total of approximately two-hundred (200) GOSR staff members. The scope of services to be provided includes the following:

(a) The contractor shall provide qualified trainers to conduct in-person training for MBTI Training and Review for approximately twenty-five (25) GOSR attendees per session at GOSR’s three (3) offices in New York City, Farmingdale and Albany.
   i. Trainers shall administer the MBTI test and develop, design and deliver a program that reviews the results and how they apply to interpersonal communication in the workplace.
   ii. The training shall include instructor presentations, lesson plans and assessments.

(b) The contractor shall provide eight (8) four (4) hour training sessions for a total of approximately two-hundred (200) GOSR staff as follows.
   i. Eight four (4) hour sessions for approximately twenty-five (25) GOSR attendees per session shall be allocated to providing MBTI testing and results review as prescribed by GOSR.

(c) The contractor shall reinforce the MBTI topics through the provision of role-playing exercises, group exercises, relevant course materials and equipment necessary to conduct the training.

4.1. Performance Locations

(a) New York City: 25 Beaver Street, New York, NY 10040
(b) Farmingdale: 500 Bi County Boulevard, Farmingdale, New York NY11735.

4.2. Commencement of Services

Selected Respondents must be prepared to commence these services within thirty (30) days of the issuance of a Task order, at the direction of GOSR.
It is expected that the training will take place in October of 2019, following GOSR’s approval of all training materials. GOSR reserves the right to change the training dates.

5. Key Deliverables

5.1. At the conclusion of each four (4) hours training session, GOSR Staff should be able to identify and comprehend principles of effective communication and management. In addition, the contractor shall provide GOSR with:

(a) Hard copy and electronic versions of course materials for each topic
(b) Final training reports to include:
   i. Attendance Reports
   ii. Individual Learning Progress Reports to include: Trainer feedback about staff participation and any identified areas of concern

6. Selection Criteria and Requirements

<table>
<thead>
<tr>
<th>Selection Criteria</th>
<th>Points Available</th>
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</thead>
<tbody>
<tr>
<td>Technical</td>
<td>80</td>
</tr>
<tr>
<td>Price</td>
<td>20</td>
</tr>
<tr>
<td><strong>TOTAL POINTS AVAILABLE</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Technical Selection Criteria</th>
<th>Points Available</th>
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</thead>
<tbody>
<tr>
<td>Project Experience and Capacity</td>
<td>40</td>
</tr>
<tr>
<td>Key Personnel</td>
<td>10</td>
</tr>
<tr>
<td>Approach and Methodology</td>
<td>20</td>
</tr>
<tr>
<td>Commitment to Compliance</td>
<td>10</td>
</tr>
<tr>
<td><strong>TOTAL TECHNICAL POINTS AVAILABLE</strong></td>
<td>80</td>
</tr>
</tbody>
</table>

6.1. Cover Letter/Executive Summary

Provide a cover letter that includes a certification that the information submitted in and with the submission is true and accurate, and that the person signing the cover letter is authorized to submit the submission on behalf of the Respondent.

Provide a table of contents that clearly identifies the location of all material within the submission by section and page number. Specify the primary contact person for the Respondent (name, title, location, telephone number, and e-mail address).
Provide an executive summary including a description of the Respondent’s legal status (e.g., individual practitioner, partnership, Limited Liability Company, corporation, non-profit organization, charitable institution, etc.), background, mission, and an explanation of the types of services the Respondent provides that relate to this RFP.

Submit a completed Respondent Overview form (page 1 of the Appendices for Request for Proposals) which includes the name, address, telephone, fax, and email of the Respondent and the names of all principals and staff that will be providing services, as well as all subcontractors and sub-consultants proposed. Respondents are encouraged to provide specific opportunities and partnerships with minority-and/or women-owned business enterprises. Please also note that all subcontractors of the selected firms, prior to and after the issuance of a contract, will be subject to prior written approval by GOSR.

6.2. Iran Divestment Act

Every bid or proposal made to HTFC/GOSR pursuant to a competitive solicitation must contain the following statement, signed by the Respondent on company letterhead and affirmed as true under penalty of perjury:

"By submission of this bid or proposal, each Respondent and each person signing on behalf of any Respondent certifies, and in the case of a joint bid or proposal each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each Respondent is not on the list created pursuant to paragraph (b) of subdivision 3 of section 165-a of the State Finance Law."

The Office of General Services maintains the list in question. A Proposal that fails to certify compliance with this requirement may not be accepted as responsive.

6.3. Project Experience

6.3.1. This section shall include:
(a) List of at a minimum of three professional references
(b) Letters of recommendation from a minimum of two former clients
(c) Description of the contractors’ background, experience and expertise in providing EEO, Diversity and Inclusion Training.

6.4. Key Personnel

6.4.1. This section shall include:
(a) Resume for all trainer(s)
Trainers should have completed an approved MBTI Qualifying or Certification Program. All trainers must also have a minimum of forty (40) hours of continuing education in approved applications and/or advanced training programs, classes or workshops and no less than forty (40) hours of practical application of the instrument in leading workshops or working with individuals in a one to one setting as coach, counselor or other consulting area. Trainers must be specifically trained on MBTI testing and review.

6.5. Approach and Methodology

Approach and Methodology shall include agendas, objectives, and complete training materials. Present a clear and straightforward work plan for all aspects of execution of services which is based on a well-defined timeline for delivery of key goals and objectives, and place emphasis on high standards for the delivery of services in expectation of meeting or exceeding these goals.

6.6. Price Proposal Form (Attachment 2) – Complete the table included in its entirety

(a) Part 1: A firm fixed unit pricing must be provided. This is inclusive of all expenses, including but not limited to travel, reproduction and incidentals, unless otherwise authorized by GOSR.

(b) Part 2: Include one rate for each title. A single blended rate cannot be proposed. Prices included in the Price Proposal Form should be the Respondent’s lowest discounted governmental prices.

The individual who signs the Proposal cover page should sign the Price Proposal Form.
ATTACHMENTS AND APPENDICES

Attachment 1 – Insurance Requirements

Attachment 2 – Price Proposal Form

Attachment 3 - RFP for Myers Briggs Indicators, Testing and Review (RFQ) Checklist

Attachment – “Use of Service-Disabled Veteran-Owned Business Enterprises in Contract Performance”

Appendix A (Form) – Affirmation of Understanding and Agreement Pursuant to State Finance Law §139-j (3) and § 139-j (6) (b)

Appendix B (Form) – Offeror Disclosure of Prior Non-Responsibility Determinations

Appendix I of the RFP Appendices – HUD General Provisions

Appendix II of the RFP Appendices – Standard Clauses for Contracts with the Housing Trust Fund Corporation

Appendix III of the RFP Appendices – Diversity Forms

Appendix A – Standard Clauses for NYS Contracts
ATTACHMENT 1

Insurance Requirements

Contractor shall procure and maintain, at its sole cost and expense, in full force and effect without interruption during all periods of services covered by this Agreement, the Services or Scope of Services, or any Task Order(s), insurance of the type, and with the limits and deductibles, listed below. Any proposed alternate insurance requirements may be submitted with the Proposal and/or may be negotiated during the contracting phase should an entity be selected. It shall be in GOSR’s sole discretion to accept or reject alternative insurance requirements.

i. **Commercial General Liability Insurance.** In an amount not less than Two Hundred and Fifty Thousand Dollars ($250,000.00) per occurrence, bodily injury (including death) and property damage combined; Two Hundred and Fifty Thousand Dollars ($250,000.00) per occurrence for personal and advertising injury. Such insurance shall be written on an “occurrence” basis and shall apply on a primary, non-contributory basis irrespective of any other insurance, whether collectible or not. The policy(ies) shall be endorsed to name HTFC, the State of New York, and all “benefitted parties” as “Additional Insureds”.

ii. **Workers’ Compensation Insurance and Disability Benefits Insurance.** Covering employers’ liability, workers compensation coverage, and disability benefits coverage as required by the provisions of the Workers’ Compensation Law (WCL) of the State of New York.

iii. **Excess Liability Insurance.** In an amount not less than Five Hundred Thousand Dollars ($500,000.00) per occurrence and Five Hundred Thousand Dollars ($500,000.00) per location aggregate limit, applying on a primary, non-contributory basis irrespective of any other insurance, whether collectible or not, and applying in excess over all limits and coverages noted in paragraphs (i) and (ii) above. This policy shall be written on an “occurrence” basis and shall be endorsed to name HTFC and the State of New York as “Additional Insureds”.

In addition –

iv. **If the vendor is providing Professional Services (other than as a Pollution Mitigation and/or Abatement Contractor- see vii below), Professional Liability Insurance.** In an amount not less than $500,000.00...
per claim limit, providing coverage for damages arising out of the acts, errors or omissions of Contractor and/or those acting under the Contractor’s direction or control and/or those for whose acts the Contractor may be liable, and relating to the professional services rendered. In the event that coverage under such policy is terminated upon or after completion of the project, then an extended reporting period of not less than two (2) years will be purchased by Contractor. Adjusted to $500,000.00

All policies shall be written with insurance companies licensed to do business in New York and rated not lower than A+ in the most current edition of AM Best’s Property Casualty Key Rating guide. All policies will provide primary coverage for obligations assumed by Vendor under this Agreement, the Services or Scope of Services, or any Work Order(s), and shall be endorsed to provide that HTFC shall receive thirty (30) days prior written notice in the event of cancellation, non-renewal or material modification of such insurance.

The Vendor shall provide Certificates of Insurance to HTFC prior to the commencement of work, and prior to any expiration or anniversary of the respective policy terms, evidencing compliance with all insurance provisions set forth above, and shall provide full and complete copies of the actual policies and all endorsements upon request. Failure to provide adequate or proper certification of insurance, specifically including HTFC, the State of New York, and all “benefitted parties” as “Additional Insureds”, shall be deemed a breach of contract.

An Accord Certificate of Insurance is an acceptable form to submit evidence of all forms of insurance coverage except Workers’ Compensation Insurance and Disability Benefits Insurance. For evidence of Workers’ Compensation Insurance, the Vendor must supply one of the following forms: Form C-105.2 (Certificate of Workers’ Compensation Insurance issued by a private carrier), Form U-26.3 (Workers Compensation Insurance issued by the State Insurance Fund), Form SI-12 (Certificate of Workers’ Compensation Self-insurance), Form GSI-105.2 (Certificate of Participation in Workers’ Compensation Group Self-Insurance), or CE-200 (Certificate of Attestation of Exemption from NYS Workers’ Compensation and/or Disability Benefits Coverage). For evidence of Disability Benefits Insurance, the Vendor must supply one of the following forms: Form DB-120.1 (Certificate of Disability Benefits Insurance), Form DB-155 (Certificate of
Disability Benefits Self-Insurance), or CE-200 (Certificate of Attestation of Exemption from NYS Workers’ Compensation and/or Disability Benefits Coverage).
ATTACHMENT 2

Price Proposal Form
RFP for Myers Briggs Indicators, Testing and Review

Firm Name: ____________________________________________________________

**Part 1:** Provide firm-fixed unit pricing and a Not-to-Exceed Total Proposal Price.

<table>
<thead>
<tr>
<th>Title/Classification/Description</th>
<th>Unit Price</th>
<th>Unit Price Discount (%)</th>
<th>Quantity (25 GOSR attendees per session)</th>
<th>Extended Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Myers–Briggs Type Indicator (MBTI) Assessment Testing and Review</td>
<td>$</td>
<td></td>
<td>8 Sessions</td>
<td></td>
</tr>
</tbody>
</table>

Total Not to-Exceed

$  

**Part 2:** In addition to the Not-to-Exceed Total Proposal Price above, identify all persons being proposed for the RFP scope so that we can better understand the Respondent’s financial approach to the project.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Hourly Billing Rate</th>
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<tbody>
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</table>

Name/Title: ______________________

Signature: _______________________

Date: ___________________________

Housing Trust Fund Corporation (HTFC)
SP# 201908_074_RFP for Myers Briggs Indicator, Testing and Review
ATTACHMENT 3
RFP for Myers Briggs Indicators, Testing and Review

Required Application Content:

☐ Cover Letter and Table of Contents
☐ IDA Certification
☐ Project Experience and Capacity
☐ Key Personnel
☐ Approach and Methodology
☐ Price Proposal Form

Required Forms and Information:

☐ Respondent Overview
☐ Appendix A – Affirmation of Understanding
☐ Appendix B – Offeror Disclosure
☐ Non Collusive Bidding Certification
☐ Appendix III – Diversity Forms (HUD & HTFC)
  ☐ Form HUD-60002 Section 3 Summary Report
  ☐ Form PROC-1 Equal Employment Opportunity Staffing Plan
  ☐ Form PROC-2 M/WBE Utilization Plan
  ☐ Form PROC-4 M/WBE and EEO Policy Statement
  ☐ Form PROC-8 EEOC Statement
  ☐ Form Use of Service-Disabled Veteran-Owned Business Enterprises in Contract Performance
☐ Vendor Responsibility Questionnaire (Respondent)
☐ Vendor Responsibility Questionnaire (Subcontractor)
☐ Certificate of Good Standing
☐ Diversity Certification, as applicable